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FACSIMILE COVER SHEET

TO:	Examiner: Jared Fureman	•	•	
FROM:	John D. Magluyan			
RE:	U.S. Application No. 10/657,234 Attorney Docket No. 00169.001469.3			
FAX NO.:	(571) 273-8300			
DATE:	August 23, 2005	NO. OF PAGES:	10	
TIME: 5:02 p.m.		SENT BY:	Gina Marie	

MESSAGE

Attached are the following papers for the above-identified application:

1. Response To Office Action;

Transmittal for Response To Office Action; and

3. Copy of page 2 of Amendment dated September 7, 2004.

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

> August 23, 2005 (Date of Deposit)

> > Date of Signature

John D. Magluyan, Reg. No.56,867 (Name of Attorney for Applicant)

August 23, 2005

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00169.001469.3

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re A	Application of:) :	Examiner: Jared Fureman	
SEPP	O REINO KERONEN, et al.)	0 4 177 1 0076	
Appli	cation No.: 10/657,234	;	Group Art Unit: 2876 RECEIV CENTRAL FAX	ED CENTER
Filed:	September 9, 2003)	AUG 2 3	2005
For:	A USER PROGRAMMABLE SMART CARD INTERFACE SYSTEM	;	August 23, 2005	
Comm	Stop Amendment nissioner for Patents Box 1450 ndria, VA 22313-1450			

RESPONSE TO OFFICE ACTION

Sir:

This filing is in response to the Office Action dated May 23, 2005.

the U.S. Patent and Trademark Office	_
Auguş	t 23, 2005
(Date o	of Deposit)
John D. Magluyan,	Reg. No.56,867
(Name of Attorne	y for Applicant)
The A. Martin	August 23, 2005 Date of Signature

In re Application of:

Docket No. 00169.001469.3

SEPPO REINO KERONEN, et al.

Application No.: 10/657,234

Examiner: Jared Fureman

Filed: September 9, 2003

Group Art Unit: 2876

For: A USER PROGRAMMABLE SMART

Date: August 23, 2005

CARD INTERFACE SYSTEM

Mail Stop Amendment THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Response To Office Action in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 50	MINUS	** 50	= 0	x \$25 \$50	\$0
INDEP. CLAIMS	* 14	MINUS	***	= 0	x \$100 \$200	\$0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT			\$0			

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claiming small entity status is enclosed, if not filed previously
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	John D. Magluyan Attorney for Applicants Project Total No. 156 867

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200

Form #120

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